

# FDA and the Reuse of Single Use Devices: Policy Moving Forward

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# Objectives of Presentation

- Explain background of reuse issue
- Provide FDA's perspective on solutions
- Describe FDA's proposed change in regulatory strategy
- *Note that the issue of open but unused devices, a common practice in hospitals, has been taken “off the table”: no longer part of FDA's reuse strategy*

# FDA's Position Historically

- Reprocessing in Hospitals/Clinics (Compliance Policy Guide 300.500)
- Any Person Engaged in Single Use Device Reprocessing is a “Manufacturer”
- Premarket Submissions Have Not Been Requested

# FDA's Position Historically

(continued)

- Requirements of 3<sup>rd</sup> Party Reprocessing Firms:
  - Device Registration and Listing, 21 CFR, Part 807
  - Good Manufacturing Practice (GMP) Inspection, 21 CFR, Part 820
  - Medical Device Reporting, 21 CFR, Part 803
  - General Labeling Requirements, 21 CFR, Part 801
- Reuse Policy Documents & Correspondence on FDA Web Page ([www.fda.gov/reuse](http://www.fda.gov/reuse))

# Simple Solutions?

- One voice in the debate suggests calling for identical regulatory controls for reprocessing as for OEMs - call for 510(k)s and PMAs
- An opposing voice suggests we leave General Controls in place as sufficient: Registration and Listing, GMP (Quality System Requirements), Labeling, and Medical Device Reporting
- Neither approach is satisfactory

# Regulatory Strategy by Risk

<b>Product Risk Category</b>	<b>Regulatory Requirements*^</b>	<b>Enforcement Date</b>
<b>“High-Risk” Products</b>	<b>R &amp; L; Premarket submissions w/in 6 months or Cease reprocessing</b>	<b>Enforcement action within 12 months</b>
<b>“Moderate-Risk” Products</b>	<b>R &amp; L; Premarket submissions w/in 12 months</b>	<b>Enforcement action within 18 months</b>
<b>“Low-Risk” Products</b>	<b>R &amp; L; Premarket submissions w/in 18 months</b>	<b>Within 2 years</b>

*\* Initially: third party reprocessors and hospitals*

*^ Premarket submissions for non-exempt devices*

# Data Submissions

- Reprocessed SUDs should be labeled the same regardless of who does reprocessing
- FDA will examine the reuse of single use devices that creates a new single use device
- Procedures already exist for approving the change of a single use device to multiple use
- FDA still working on submission requirements
- FDA reconsidering “high risk” exempt products

# Enforcement Approach

- Third party reproprocessors will fall into usual approaches from FDA for manufacturers
- Hospitals may wish to continue to reprocess
  - For reuse of exempt products, hospitals will have to follow general controls (esp. GMP)
  - For non-exempt products, hospitals will have to submit premarket notification or approval
  - FDA partnering with JCAHO to monitor
- Other health care facilities will be considered



# Vision for the Future

## Current Reality

- Widespread practice with little data on safety or effectiveness
- Single use labels not clearly meaningful; don't identify vulnerabilities
- Patients are not informed - experimentation?

## Future Vision

- FDA approach will be risk and science based
- Premarket submissions will be required: projected date Jan 2001
- Horizontal and vertical standards could be useful
- Substantial outreach
- Leverage outside parties, e.g., JCAHO